

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»**



МАТЕРІАЛИ
105-ї підсумкової науково-практичної конференції
з міжнародною участю
професорсько-викладацького персоналу
БУКОВИНСЬКОГО ДЕРЖАВНОГО МЕДИЧНОГО УНІВЕРСИТЕТУ
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Матеріали підсумкової 105-ї науково-практичної конференції з міжнародною участю професорсько-викладацького персоналу Буковинського державного медичного університету, присвяченої 80-річчю БДМУ (м. Чернівці, 05, 07, 12 лютого 2024 р.) – Чернівці: Медуніверситет, 2024. – 477 с. іл.

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У збірнику представлені матеріали 105-ї підсумкової науково-практичної конференції з міжнародною участю професорсько-викладацького персоналу Буковинського державного медичного університету, присвяченої 80-річчю БДМУ (м. Чернівці, 05, 07, 12 лютого 2024 р.) із стилістикою та орфографією у авторській редакції. Публікації присвячені актуальним проблемам фундаментальної, теоретичної та клінічної медицини.

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Conclusions. Thus, the analysis of the demographic situation proved its unfavorable trends both in Ukraine in general and in Bukovina in particular, namely: a decrease in the population and an increase in the demographic burden due to the aging of the population

Domanchuk T.I.

CHARACTERISTICS OF THE MAIN RISK FACTORS OF THE DEVELOPMENT OF GASTRIC CANCER

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Introduction. Gastric cancer occupies an important place among the gastrointestinal tract, which remains one of the most common and deadly neoplasms in the world. The incidence of malignant neoplasms of the gastric (GMN) ranks fifth among all cancers (5.7% of all new cancer cases) and ranks second in the structure of cancer incidence of digestive organs. Every year, more than a million new cases of GMN are diagnosed worldwide, and more than 600,000 people die from it, despite the stabilization of the incidence in some developed countries. Ukraine ranks 8-9 in the list of 49 countries with registered morbidity. Every year, 6-8 thousand new cases of GMN are registered in the country (among men - 22.3 per 100 thousand population, women - 12.6%).

The aim of the study. To evaluate the main risk factors for the development of stomach cancer and to provide them with a medical and social characteristic.

Material and methods. An analytical retrospective epidemiological medical-sociological study of a representative number of patients with gastric malignancies - 130 patients of the main group and 50 people with precancerous diseases of the stomach from the comparison group - was conducted with the aim of in-depth study of medical and organizational risk factors in the study.

Results. It was found that the risk factors for malignancy of precancerous diseases of the stomach, in addition to uncontrolled ones, are mostly modified: behavioral - unfavorable eating habits: too frequent meals ($OR=5.27$; 95% CI=2.59-10.72), excessive consumption of sweets (3.48; 1.28-9.48), caffeinated beverages (3.37; 1.64-6.92) and alcohol (3.12; 1.44-6.78), insufficient water consumption (3.04; 1.43-6.45), smoking (2.97; 1.46-6.06), particularly intensive (5.80; 1.10-30.50); professional - contact with industrial hazards of a chemical nature (2.30; 1.02-4.20), as well as genetic - burdened hereditary anamnesis (5.20; 2.25-12.02) and social - living in rural areas (28.61; 8.44-97.03). It was established that the occurrence of complaints of discomfort from the digestive organs (2.93; 1.39-6.18) and a decrease in body weight (2.07; 1.07-4.02) are predictors of malignant transformation.

Conclusion. The appearance of new malignant neoplasms of the stomach is due to both uncontrollable risk factors and, in the vast majority, modified ones, and stressful situations contribute to the least degree of malignancy of precancerous gastric diseases.

Hrytsiuk M.I.

MEDICAL ASSISTANCE FOR PATIENTS WITH DIAGNOSED CANCER AND PRE-CANCER DISEASES OF THE STOMACH

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Introduction. Modern medicine is able to cure malignant tumors of almost all localizations, if they are diagnosed in the early stages. The difficulties of such diagnosis, which were in the past the main reason for the neglect of the disease, are now overcome by modern methods of researching cancer patients. Regular preventive examinations allow timely detection of visual localizations of cancer - skin, oral cavity, larynx, mammary gland, and cervix. The introduction of modern endoscopic diagnostic methods into widespread practice makes it possible to recognize tumors of the gastrointestinal tract and bronchi in the initial stages of the disease. However, despite this, the percentage of neglected cases continues to be very high: almost every fifth patient is diagnosed in the neglected stage. Among malignant neoplasms, stomach cancer occupies an important place. As a non-visual form, TN of this localization is often detected in the late stages, which leads to high

mortality of patients already in the first year after detection. All this allows us to put forward a hypothesis about the shortcomings in the organization of prevention and medical care of oncology, in particular, regarding early detection and prevention of malignancy of precancerous diseases in gastric cancer.

The aim of the study to identify shortcomings in the organization of prevention and medical care, in particular regarding early detection and prevention of malignancy of precancerous diseases in gastric cancer.

Material and methods. Analytical retrospective epidemiological medico-sociological study of a representative number of patients with malignant neoplasms of the stomach - 130 patients of the main group and 50 people with precancerous diseases of the stomach of the comparison group was conducted with the aim of in-depth study of the organization of medical care for patients.

Results. It was found that the complete coverage of patients with gastric cancer by dispensary observation in 2016-2020 increased both in Ukraine (up to 84.0%) and in the Chernivtsi region (92.1%), but the specific weight of those who was registered for more than five years, although it also increased somewhat, it remained significantly lower (59.5% and 69.8%, respectively). It has been proven that the absence of dispensary monitoring for precancerous diseases of the stomach significantly increases the chances of their malignancy ($OR=29.18$; 95%CI=11.60-73.40), but only 18.2% of such patients were registered. Respondents with precancerous diseases of the gastric also showed insufficient adherence to medical treatment, mainly due to financial motives (21.00; 2.51-175.70) and the prescribed diet, non-compliance with which also contributes to malignancy (4.73; 2.15-10 ,40).

Conclusions. The main risk factors for the transformation of precancerous diseases of the stomach directly into cancer are failure to consult doctors, primarily PMD, both about the disease and screenings, and especially - about dynamic monitoring, as well as low adherence to recommendations for drug treatment and diet.

Mandryk-Melnychuk M.V.
HUMAN RESOURCE PROBLEM FOR MANAGEMENT
OF THE HEALTH CARE SYSTEM
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Introduction. The health care sector in Ukraine is one of the most prioritized, especially in the conditions of armed conflict and the problems and consequences that accompany it. It is about clear and transparent mechanisms for the further reform of the health care system, taking into account the challenges of time, costs, the growing demand of certain industries, the need to repurpose institutions into rehabilitation centers for the military.

The aim of the study. A well-thought-out medical policy of the Ukrainian state is one of the levers of stable development of society, proper provision of services to various categories of the population, including adhering to the principles of barrier-free access and inclusion, rapid response to the number of needy and injured persons who have left the war zone for safe regions. So, we should talk about effective management, which is responsible for further reforming the industry, for the correct allocation of budget funds, attracting alternative sources of financing, that is, training, qualification level, forms and methods of training or retraining must meet the latest requirements and challenges of the time. The state model is typical for Britain, Canada, Sweden, Finland and Ukraine.

Material and methods. Fundamental provisions of the science of public administration and general scientific principles of analysis of social phenomena and processes, as well as theoretical works of leading scientists. Methods of systematic analysis and synthesis, comparison, systematization made it possible to outline the connections between the elements of the model of public management of the health care system as the basics of reforming the medical system in Ukraine.